Priorities for Access To Health

Transportation Equity and Community Health (TEACH) in Contra Costa County
The Transportation and Land Use Coalition is a partnership of over 90 groups working for a sustainable and socially just Bay Area. We envision a region with healthy, walkable communities that provide all residents with transportation choices and affordable housing. The coalition analyzes county and regional policies, works with community groups to develop alternatives, and coordinates grassroots campaigns.

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<table>
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<th>Margaret Okuzumi</th>
</tr>
</thead>
<tbody>
<tr>
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<td><em>Greenbelt Alliance</em></td>
<td><em>Urban Habitat</em></td>
<td><em>BayRail Alliance</em></td>
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<td>Tom Radulovich</td>
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<td><em>LIFETIME</em></td>
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</tr>
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<td><em>Bay Area Bicycle Coalition</em></td>
<td><em>Urban Ecology</em></td>
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</tbody>
</table>

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Much of the progress described in this report is due to community volunteers and health and transit agency representatives who have participated in the TEACH Working Groups: Monica Barajas, Tighe Boyle, Virginia Brunk, Paul Branson, Roxanne Carrillo, Gaby Castañeda, Wendy Cervantes, Tom Conrad, Leonor Contreras, Cindy Dahlgren, Raquel Díaz, Marta Flores, María Guadalupe Jimenez, Tom Harais, Doris Hernandez, Teri House, Connie James, Mary Lou Laubscher, Guadalupe Lopez, Lorena Martínez-Ochoa, Imelda Medina, Miriam Medina, Pablo Medina, Betsabé Molinar, Lucía Newcomer, Anne Perridge-Heavy, Martha Potts, Juana Quezada, Marisol Ramos, Carmen Elena Rodas, Lucy Rodríguez, Chuck Rogers, Sherry Rufini, Rosalía Salcedo, and Luz Sierra.

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Table of Contents

Executive Summary ...................................................................................1

Maps ............................................................................................................3
  Access to Health Care for Monument Corridor
  Access to Health Care for Pittsburg and Bay Point

Introduction ................................................................................................7

Progress on Priorities: Monument Corridor ........................................11
  Install more shelters and benches, with bus information at each stop
  Increase availability and distribution of bilingual materials about riding the bus
  Increase frequency of County Connection buses connecting the Monument to health clinics
  Expand volunteer driver programs and/or health van taking people between homes and health facilities
  Coordinate schedules between County Connection #114 and buses to health clinics to reduce wait at BART
  Bus service to social services at St. Francis of Assisi

Progress on Priorities: Bay Point/Pittsburg ...........................................17
  Install more bus shelters and benches
  Advocate to increase frequency and reduce wait time at BART station for buses to Health Facilities
  Bilingual information about transportation services
  Accommodation of strollers on buses
  Advocate for fare and transfer policies that are less expensive for regular users
  Change Tri Delta’s route #389 to travel through Lynbrook Park neighborhood
  Prioritize health access in Railroad Ave. station area plan for new eBART station

Progress on Priorities: Countywide ..........................................................22
  Increase coordination between health agencies and transit agencies
  Coordination of health care clinic locations with transportation routes
Executive Summary

Lack of adequate transportation is often cited as a reason for not seeking or receiving health care by people who cannot or do not drive. Aware of the critical role that inadequate transportation access to health facilities plays in the health of Bay Area residents, the Transportation and Land Use Coalition (TALC) initiated a study to investigate this problem. The resulting report, *Roadblocks to Health*, which was released in 2002 in conjunction with two social justice groups, looked at transit and walking access to health care in 15 low-income communities in the region. That study found that residents of Contra Costa’s low-income neighborhoods had the worst access to health care of the three counties studied. These communities have many residents that do not drive; at the same time, infrequent transit service and spread out land use make clinics and hospitals difficult to reach.

The California Endowment then funded TALC to initiate the Transportation Equity and Community Health (TEACH) project to bring together community members and transportation and health agency staff to address these problems. In Concord’s Monument Corridor and Pittsburg/Bay Point, specific obstacles to health care facilities by transit and walking were identified through needs assessments with community members and health officials. These obstacles were then prioritized through community forums held in October 2004. Implementing these solutions, which include improvements such as more benches and shelters at bus stops, bilingual information, volunteer shuttles, and more frequent bus service, has been the mandate of the TEACH Working Groups consisting of community, health and transit representatives.

Since 2004, the Working Groups have had remarkable successes, especially on issues that could be addressed through cooperation and communication. In the Monument Corridor, for example, the Working Group’s activities have led County Connection to start a new bus route to health facilities in downtown Concord and to improve informational materials for monolingual Spanish speakers; the City of Concord has also committed to installing more benches at bus stops. In Bay Point, Tri Delta Transit is starting to improve informational materials for Spanish-speakers, has installed bus shelters in the neighborhood, and has developed a new three-year marketing plan that addresses a number of issues identified by Working Group members.

However, some items that could greatly improve access to healthcare in these communities cannot happen without new funding sources. To provide more direct and frequent transit to healthcare for Monument Corridor residents, for example, a new route that links health care facilities or a community shuttle is needed. Similarly, Bay Point’s need for more frequent service and additional bus shelters require additional funding.

In 2006, both TEACH project neighborhoods, Concord’s Monument Corridor and Pittsburg/Bay Point, will conduct Community Based Transportation Plans (CBTP). These planning processes, sponsored by the Metropolitan Transportation Commission (MTC), emphasize community involvement in prioritizing transportation needs and identifying potential solutions in low-income neighborhoods. As the two neighborhoods prepare to develop first-ever CBTPs, this paper examines the progress to date and roadblocks not yet overcome in the TEACH project in Contra Costa County.

Community-Based Transportation Plans give the TEACH Working Group members, who have been focused on access to health, a chance to broaden their scope and help identify other access issues. What’s more, money will be available to fund these projects, making resident’s demands for better access to health care in the CBTP process particularly timely! In spring 2006 Contra
Costa County will have over $2 million available for Lifeline Transportation needs, some of which can be used to fund transportation solutions already identified by the TEACH project.

This report provides an outline of the TEACH project priority solutions, progress to date, and remaining needs. Also included are maps, *Access to Health Care for Monument Corridor* and *Access to Health Care for Pittsburg and Bay Point*, which show key locations, routes, and frequencies. Below are some of the priorities described in the report:

<table>
<thead>
<tr>
<th>PRIORITY</th>
<th>COMMUNITY</th>
<th>PROGRESS</th>
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</thead>
<tbody>
<tr>
<td>More <strong>bus shelters and benches</strong></td>
<td>Monument Corridor</td>
<td>Community Development Block Grant will fund 35 benches in locations identified by the Working Group bus stop survey.</td>
</tr>
<tr>
<td>Improve <strong>bilingual transit information</strong> materials and availability</td>
<td>Monument Corridor</td>
<td>County Connection secured funds for extensive bilingual outreach and materials, plus a travel-buddy program for Latino residents. CC’s customer phone line now serves Spanish-speakers, and new discount pass sales locations in the Monument distribute bilingual information.</td>
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<tr>
<td>Increase frequency of buses connecting to <strong>health clinics</strong></td>
<td>Monument Corridor</td>
<td>County Connection has restructured line #115 and created a neighborhood loop #115B. The change doubled the frequency to the Concord Health Center and to the John Muir Medical Center.</td>
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<tr>
<td><em>Bus service to food pantry</em></td>
<td>Monument Corridor</td>
<td>County Connection’s route #111 now serves St. Vincent de Paul, helping residents to take home goods from the pantry.</td>
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<tr>
<td>More <strong>bus shelters and benches</strong></td>
<td>Bay Point/ Pittsburg</td>
<td>Two shelters have been installed at locations identified by residents at the January 2005 TEACH community forum; a third is expected in July 2006.</td>
</tr>
<tr>
<td>Increase frequency and decrease transfer wait time of buses to clinics</td>
<td>Bay Point/ Pittsburg</td>
<td>Tri Delta Transit created a new stop on rte. #200 at the BART station, cutting 45 minutes from the trip to CCRMC and adding another quick connection from BART to the Pittsburg Health Center and La Clinica.</td>
</tr>
<tr>
<td><em>Improved bilingual transit information</em></td>
<td>Bay Point/ Pittsburg</td>
<td>Tri Delta Transit has implemented the Working Group’s suggestions for improvements to marketing materials and developed a new three-year marketing plan proposing extensive outreach to the Latino community.</td>
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<tr>
<td>Increased <strong>coordination</strong> between <strong>health and transit agencies</strong></td>
<td>Countywide</td>
<td>Representatives from the Contra Costa Health Access Coalition regularly attend Transportation Alliance meetings and vice versa. The Health Access Coalition hosted two transportation-focused meetings.</td>
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* Indicates a priority that emerged from the TEACH Working Group meetings.
### Access to Health Care for Monument Corridor / Acceso al Cuidado de Salud para el Monument Corridor

#### County Health Services / Servicios de Salud del Condado:
- To apply for Medi-Cal / Para aplicar a Medi-Cal: 1-800-705-6268
- For assistance with free or low-cost insurance application / Para recibir asistencia en aplicar para seguro médico de bajo costo o gratuito: 1-877-503-8258
- For county health services / Para servicios médicos del condado: 1-800-843-6644

#### Community Clinics / Clínicas Comunitarias:
- La Clinica Monument: 925-365-2000
- Planned Parenthood Concord: 925-675-0250

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<table>
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<tr>
<th>County Connection Route / Ruta</th>
<th>AM</th>
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<th>Evening from 7:00 PM - Noche desde 7:00 PM</th>
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This map does not show all bus routes in the area. It only shows the ones listed in the table above.
Access to Health Care for Pittsburg and Bay Point/
Acceso al Cuidado de Salud para Pittsburg y Bay Point

TEACH Project Areas/
Area del Proyecto TEACH

Clinic or Hospital/
Clínica u Hospital

School/ Escuela

Pass Sales Location/
Venta de pases de descuento

BART

Bus Route/ Ruta de Autobús

200  388  390

380  389  391

County Health Services/ Servicios de Salud del Condado:
- To apply for Medi-Cal: Para aplicar a Medi-Cal: 1-800-709-8348
- For assistance with free or low-cost insurance application: Para recibir asistencia en aplicar para seguro médico de bajo costo o gratis: 1-877-503-9350
- For county health services: para servicios medicos del condado: 1-800-896-9644

Community Clinics/ Clinicas Comunitarias:
- La Clínica Pittsburg: 925-431-1250

* Because Rte. #389 is a loop, the bus will pass any given point every 30 min., but every 60 min. going in each direction.
* Porque la ruta #389 corre circular, el bus pasa por el mismo punto cada 30 min., pero cada 60 min. en cada dirección.
Introduction

Inadequate transportation access to health care is hurting our communities. For many low-income residents without cars, poor walking and transit access to health care facilities can lead to missed medical appointments; many individuals simply stop scheduling appointments for treatment of chronic illnesses.

Clinic and hospital surveys often indicate that inadequate transportation is one of the primary reasons that very-low-income families do not schedule regular medical appointments, even if they are covered by insurance. And no wonder – it can take a full day to reach a clinic and return home via public transit, often resulting in missed workdays, missed school, and missed appointments that can be difficult to make up or reschedule.

To investigate the extent of this problem in the Bay Area, the Transportation and Land Use Coalition (TALC) and two social justice groups collaborated to conduct a community survey and execute the most sophisticated GIS mapping analysis ever done on access to healthy activities. This work culminated in the 2002 release of Roadblocks to Health, a groundbreaking study of walking and transit access to health facilities in 15 low-income communities. Of the three counties studied, the worst situation was in Contra Costa County, where only 33% of residents had convenient transit or walking access to a health clinic. By comparison, 70% - 90% of residents in Alameda and Santa Clara’s low-income communities had convenient transit access, defined as access to a health clinic within a half-hour transit ride or a half-mile walk.

Contra Costa’s low-income residents have suffered from a combination of insufficient investment in public transit, dispersed services, and low-density suburban housing. Within Contra Costa County, the worst transit access is in the spread-out central and eastern portions of the county.

Another factor exacerbating the problem has been lack of coordinated planning. In transportation policy discussions, access to healthcare has not traditionally been a high priority, even in discussions of low-income families’ transportation needs. And when health officials make decisions about locations of health facilities, the availability of public transit is too often only considered as an afterthought.

These trends are starting to change.

Transportation Equity And Community Health (TEACH) in Contra Costa County

To combat this problem, the TALC initiated the Transportation Equity And Community Health (TEACH) project to bring together transit agencies, health officials, and community leaders. With primary funding from The California Endowment and support from the Friedell Foundation and the East Bay Community Foundation, the project aims to improve transit access to health care in Contra Costa’s low-income neighborhoods, focusing on Concord’s Monument Corridor, Bay Point, and Pittsburg.

Needs Assessments

During 2003 and 2004, the TEACH project conducted needs assessments with over 120 individuals, including community residents, health care providers both with Contra Costa Health Services and with community clinics, social service providers, and transit agencies. Assessments included one-on-one interviews and group sessions with community residents, with some sessions conducted in Spanish. The needs assessments were roughly equally divided between respondents...
in East County (Pittsburg/Bay Point), Concord’s Monument Corridor, and countywide. Participants were chosen to represent a broad cross-section of stakeholders on community health issues.

The needs assessments yielded a detailed list of specific transportation barriers to accessing medical care services, and engaged many health officials, advocates and community members in the TEACH project.

Community Forums Set Priorities

In late 2004, two community forums (one in Concord, one in Bay Point) each brought together over 40 community residents and staff from health and transit agencies to discuss transportation barriers to healthcare and prioritize possible solutions. In keeping with the project’s goal of promoting dialogue, each event began with a three-person panel (a community resident, a health agency official, and a transit agency official) who shared information about the problems residents face in getting to health care, what agencies are doing to address those problems, and the challenges to improving access.

Based on input from the needs assessments, TALC outlined a range of potential solutions for improving access to area clinics and hospitals, and all participants prioritized among the possible solutions. In both areas, a high percentage of the low-income population is monolingual Spanish speaking. Bilingual invitations and materials, simultaneous translation in Spanish, plus free child-care made it easier for community residents to make significant contributions in both forums. The community forums identified the following high priority solutions in each area.

Monument Corridor (Concord):

- Install more shelters and benches, with bus information at each stop.
- Increase public distribution of bilingual materials about riding the bus.
- Make buses to health clinics come more frequently.
- Expand volunteer driver programs and/or create new programs.
- Start a health van to take people between homes and health facilities.
- Coordinate schedules between County Connection route #114 and other routes serving health clinics to reduce wait times at BART.

Bay Point/Pittsburg:

- Install more bus shelters and benches.
- Increase frequency of Tri Delta Transit Buses serving Bay Point and Pittsburg health clinics.
- Coordinate schedules between Tri Delta Transit routes #389 and #391 to reduce wait times at BART for Bay Point residents going to the Pittsburg Health Center.
- Increase coordination between health and transit agencies.

At the forums, dozens of residents and agency representatives agreed to form ongoing Working Groups to address these issues. These Working Groups have been meeting every 1-2 months since late 2004. Each Working Group meeting includes representatives of all three sectors in the project: community residents, health officials, and transit agency personnel. Working Group meetings are fully bilingual and include arrangements for childcare.
Working Groups Win Changes

These Working Groups have been remarkably successful. Both transit agencies – County Connection and Tri Delta Transit – came to the first Working Group meetings with commitments to take action on specific solutions the community had prioritized and have followed up by fulfilling those commitments and making additional ones. Community residents, with assistance from health officials, have maintained a high level of enthusiasm, in part spurred by the advocacy successes and improvements made by the transit and health agencies. Agencies that have maintained high involvement in TEACH include the Monument Community Partnership (MCP), health agencies in the Health Access Coalition, the Contra Costa Transportation Alliance, the Bay Point Partnership, and many projects of Contra Costa Health Services, such as the Family Maternal and Child Health Programs, the Healthy Neighborhoods Project, and Welcome Home Baby.

The Progress on Priorities section of this paper describes the priority solutions identified in the community forums, what the Working Groups have achieved so far, and next steps.

Opportunities in 2006

Now, both the Monument Corridor and Bay Point are embarking on public processes to develop first-ever Community-Based Transportation Plans (CBTP’s). These CBTP’s will prioritize locally identified transportation gaps within the community and use input from residents to evaluate options for filling these gaps.

In March 2006, the Contra Costa Transportation Authority is expected to release a call for projects for a new regional Lifeline Transportation funding program, whose purpose is to improve transportation access for low-income residents. The program will provide approximately $2 million in Contra Costa County in the first round of funding, and amounts are expected to increase in future rounds of funding. This new funding, combined with new CBTP’s that incorporate results of the TEACH project, puts these neighborhoods in an excellent position to make vital transportation improvements.
Progress on Priorities

The following pages describe the solutions the TEACH Working Groups have identified and are pursuing, organized by the following geographic areas: Monument Corridor, Bay Point/Pittsburg, and Countywide.

Within each geographic area, we first describe the highest priority solutions from the community forums listed on page 4. For each of these solutions, there is a one-page description that includes its expected cost, what the Working Group has achieved so far, and next steps. Costs are categorized as low, medium, or high cost according to the following criteria:

- **Low**: Less than $20,000/year ongoing cost, or less than $20,000 one-time cost.
- **Medium**: $20,000 - $100,000/year ongoing cost, or $20,000 - $100,000 one-time cost.
- **High**: Greater than $100,000/year ongoing cost, or greater than $100,000 one-time cost.

We also include information on additional solutions that have emerged from the Working Groups’ activities, with less detail than for the solutions prioritized in the forums. These emerging solutions include:

- Bus service to social services at St. Francis of Assisi Church (Monument Corridor)
- Bilingual information about transportation services (Bay Point/Pittsburg)
- Accommodation of strollers on buses (Bay Point/Pittsburg)
- Flexible transfer policy on Tri Delta Transit buses (Bay Point/Pittsburg)
- Modifying route #389 to better serve the area surrounding Lynbrook Park (Bay Point/Pittsburg)
- Coordination of health care clinic locations with transportation routes (Countywide)
Monument Corridor Priority #1

Install more bus shelters and benches, with bus information at each stop

Background: Having shelters and benches at bus stops makes it easier to use the bus, particularly for people with children, seniors, people with disabilities, and very sick people. And simply posting a route schedule and map at each stop can make it easier to know how to use the bus. Like many transit agencies, County Connection contracts with an advertising company (Viacom) to supply, install, and maintain bus shelters or benches in return for advertising.

Cost: Medium one-time costs, including installation, of about $600-$1,000 per stop for seats or a bench, and approximately $5,000 per shelter. Low ongoing costs for maintenance: For posting a schedule and map, there would be low one-time and ongoing costs for each stop, but County Connection has about 1600 stops throughout their service area, so overall costs would be higher.

Current Status: TEACH Working Group members rode key routes used to access health care facilities, identified desired locations for the new shelters and benches, and then prioritized them according to predicted need.

The City of Concord applied for and was awarded a Community Development Block Grant of $25,000 to install at least 35 benches at bus stops throughout the city. The City asked for input from the Working Group for location possibilities from the bus stop survey, most of which will receive benches on each side of the street (and one of which will receive a bus shelter). Currently, the group is working with the city to find a durable cost-effective bench.

At the Working Group’s request, County Connection has passed on a list of desired shelter locations to Viacom, the company that installs shelters at no-cost in prime advertising locations to consider additional shelters.

Next Steps:

- Group members will work with County Connection and Viacom to secure new shelters for the Monument Corridor.
- Continue to work with the City in the bench installation process to ensure that the benches are placed in the community’s top priority locations.
Monument Corridor Priority #2

Increase availability and distribution of bilingual materials about riding the bus

**Background:** Many people – particularly Spanish-speakers – have difficulty figuring out how to use the bus system. There is a big need for more bilingual outreach on how to use the bus. This need could be met with Spanish-language versions of materials such as County Connection’s Rider’s Guide and system map or a pictorial guide on how to use the bus, useful for people who do not read either English or Spanish. The distribution effort would need to be channeled through community groups and media that community members use and trust.

**Cost:** Medium one-time and ongoing costs.

**Current Status:** Recognizing that the Spanish-speaking community in the Monument Corridor is a significant part of their ridership, County Connection has been very responsive on this issue. With support from TALC, the agency applied for and was recently awarded a Caltrans Environmental Justice grant to improve outreach and materials geared toward the Spanish-speaking community. Funds from the grant will go to recruit and provide a stipend for five bilingual outreach community members and to develop materials that are culturally sensitive and pictorial to further extend their audience to persons who cannot read, all with extensive input from the community. The bilingual outreach team will also be part of a new “travel buddy” system. Travel buddies will accompany new riders on a bus trip and walk them through the travel/ticket purchase process. Some members of the outreach/travel buddy team will come from the TEACH Working Group.

The Monument TEACH Working Group has already begun working with County Connection to provide suggestions to make materials more accessible to non-English speakers. The transit agency has overhauled the majority of their materials to be fully bilingual and continues to work towards making these materials more accessible.

Working Group members also worked with County Connection to recruit three local markets within the neighborhood to distribute bilingual materials such as maps and schedules, and sell discount passes. There were previously no such locations within the Monument Corridor.

In response to Working Group recommendations, County Connection’s customer service phone line is now able to serve Spanish speakers. The *Monument Community Newsletter*, a new bilingual monthly in the neighborhood, has published an article to publicize the new discount pass sale locations and will continue to publicize the Working Group’s activities.

**Next Steps:**

- Continue to work with County Connection to improve materials and outreach.
- Continue to submit update articles in local newspapers to ensure the community is aware of changes and improvements.
Monument Corridor Priority #3

Increase frequency of County Connection buses connecting the Monument Corridor to health clinics

**Background:** The main route traveling through the Monument (#114) runs quite often (approximately every 20 minutes during weekday mid-day hours). However, connecting routes that go to health care facilities come less often. A priority is to make sure that buses come at least every 30 minutes during daytime hours on routes that serve key services such as:

- Concord Health Center (#115)
- Contra Costa Regional Medical Center in Martinez (#116)
- John Muir Medical Center (#117)
- CCHS Pediatric clinic on Stanwell (#118)
- St. Francis of Assisi Food Pantry and social services (#111)

**Cost:** High ongoing costs to increase frequencies on all lines: almost $800,000 per year. Medium to High ongoing costs for individual lines: about $60,000-$350,000 per year.¹

**Current Status:** Based in part on suggestions from the TEACH project, County Connection decided to restructure one line (#115) that passes by a health clinic and initiate a new neighborhood loop shuttle (#115B) in downtown Concord. This new line effectively doubles the frequency to about every 15 minutes that buses travel from Concord BART to the Concord Health Center and the John Muir Medical Center; the new service went into effect in April 2005.

Beyond that improvement, in the short term there are no likely new sources of funding that would pay to permanently increase service levels at higher frequencies. Over the longer term, County Connection is slated to receive an increase in funding when the renewal of the county transportation sales tax goes into effect in 2009. In the interim, the agency may apply for Lifeline Transportation funding.

**Next Steps:**

- Make this improvement a top priority in the Community-Based Transportation Planning process.
- Ensure that access to healthcare remains on County Connection’s policy agenda so that the agency will consider increasing service to Contra Costa Regional Medical Center when new funding becomes available in 2009 and/or by applying for Lifeline Transportation funding.
- Voice the need for a direct route to clinics from the Monument during the Community-Based Transportation Planning process and apply for Lifeline funds for this service.

¹ TALC estimates based on data provided by County Connection to Metropolitan Transportation Commission for Lifeline Transit Network cost estimates, 2001. Actual costs may be different due to changes in costs or service since 2001.
Monument Corridor Priority #4

Expand volunteer driver programs and/or create new programs; new health van taking people between homes and health facilities

**Background:** Volunteer driver programs recruit volunteers to use their own car to give patients rides to and from health care appointments. New funding could expand current programs or create new ones, allow for driver incentives to help attract drivers, purchase insurance, expand eligibility for current programs, and/or hire a staff person to coordinate ride requests and schedule volunteer drivers. Such programs serve people who have a very hard time riding the bus, such as those who are simply too sick, the chronically ill, and families with small children.

Alternatively, one or more new health vans could respond to individual requests to pick up people at their homes, take them to a health facility, and give them a ride home after their appointment. This service could also improve access for people who have a very hard time riding the bus and who do not qualify for ADA paratransit, such as those who are temporarily sick and families with small children. It would be particularly helpful for Monument Corridor residents who have difficulty making the bus transfers that are necessary to reach most health clinics, particularly the Contra Costa Regional Medical Center in Martinez. The service could be run by a health facility or community group and be available full-time or on a limited schedule.

**Cost:** *Medium ongoing costs:* The American Cancer Society’s countywide program employs two staff people to coordinate 44 volunteers. *Medium to High ongoing costs* and *Medium one-time costs* for a full-time van with driver and scheduler.

**Current Status:** Based on great enthusiasm for a community shuttle, the Monument Community Partnership has created the Transportation Action Team, a spin-off from the TEACH Working Group. With technical assistance from TALC and in cooperation with the TEACH Working Group, the newly formed Transportation Action Team is forming a long-term strategy to set up a shuttle that will provide mobility for Monument residents among several community service centers, including health facilities.

**Next Steps:**
- Continue to provide technical assistance and support to the MCP Transportation Action Team.
- Emphasize this need during the Community-Based Transportation Planning process. A new community shuttle or a new bus route connecting the Monument to health facilities may meet this need.
Monument Corridor Priority #5

Coordinate schedules between County Connection #114 and buses to health clinics to reduce wait time at BART stations

**Background:** For all health facilities, except La Clinica Monument, residents traveling by bus from Monument Corridor must take the #114 and transfer to another bus at either the Concord or Pleasant Hill BART stations. Since most routes (besides the #114) run on an irregular schedule, planning a trip can be difficult. The amount of time spent waiting for the transfer can make a big difference in how long it takes to get from home to the clinic and back again.

Residents don’t have to wait for the #114 for very long since it comes approximately every 20 minutes. But when connecting to routes that run less frequently, such as the #117 to John Muir Medical Center, the #116 to Contra Costa Regional Medical Center, and the #118 to the WIC clinic on Stanwell, residents often have to wait more than 20 minutes to connect to these buses. Coordinating schedules (or “timed transfers”) between the #114 and other routes could decrease waiting time at BART and the total time spent on the bus.

**Cost:** Low one-time costs to investigate whether this would work. Unknown ongoing costs, depending on whether coordination requires adding any buses to the schedule.

**Current Status:** Great progress was made on this priority with the changes to route #115, described earlier in Monument Corridor Priority #3. The change, which increased frequency of the buses that travel to the Concord Health Center to about every 15 minutes, allows for shorter connection waits at the Concord BART Station.

County Connection also agreed to consider revising routes #114 and the #116 to Contra Costa Regional Medical Center. Currently, riders on the #114 transferring to the #116 have two transfer options: they can get off the #114 and walk 3 blocks to pick up the #116, or they can travel an extra 20 minutes on the bus to make a direct transfer at the Pleasant Hill BART station. County Connection has agreed to consider changing routes so that the two buses meet at a single point somewhere along Monument Boulevard. This would decrease roundtrip travel time to Contra Costa Regional Medical Center by as much as 30 minutes or more and also improve access to La Clinica Monument. The gap between the routes’ stops is evident in this report’s Access to Health Care for Monument Corridor map.

**Next Steps:**

- Follow up with County Connection to ensure the agency investigates schedule coordination with the #114, including the possibility of establishing a transfer point between the #114 and #116 along Monument Blvd.
**Monument Corridor Emerging Priority**

**Bus service to social services at St. Francis of Assisi**

At the first meeting of the TEACH Working Group, several Monument Corridor residents raised the issue of lack of transportation to a destination vital to many Monument families: St Francis of Assisi Church. The church is a vital destination because it houses many services that residents depend on, including a food pantry and financial assistance through St. Vincent de Paul. County Connection Route #111 runs near the facility, but did not directly serve the church because of a need to take students to another vital destination five blocks away: Oak Grove Middle School.

In response to urging by the residents, County Connection has now changed Route #111 to directly serve St. Francis of Assisi at times other than school start and dismissal. This change continues to serve the middle school and adds a connection to vital social services. The resulting addition to route #111 is shown in dotted lines on the Access to Health Care for Monument Corridor Map in the beginning of this report.

**Next Steps:**

- Publicize the changes in Route #111 to families who use the services at St. Francis of Assisi.
Bay Point/Pittsburg Priority #1

Install more bus shelters and benches

Background: Having shelters and benches at bus stops makes it easier to use the bus, particularly for seniors, people with children, people with disabilities, or very sick people. While most transit agencies contract with advertising companies to supply, install, and maintain bus shelters or benches in return for advertising, Tri Delta Transit does not. Instead, Tri Delta Transit pays for their own shelters and retains complete control over where to put them.

Cost: Medium one-time costs, including installation, of about $600-$1000 per stop for seats or a bench and approximately $5,000 per shelter. Low ongoing costs for maintenance.

Current Status: At the first meeting of the Bay Point/Pittsburg TEACH Working Group, Tri Delta Transit committed to installing at least three new bus shelters in Bay Point. To prioritize where these shelters would go, the TEACH Working Group, along with Padres Latinos, the Bay Point Partnership, the Bay Point Family Health Center, and the Healthy Neighborhoods Project co-sponsored a community forum to ensure broad input in deciding where the shelters should be installed. The forum resulted in a prioritized list of ten locations where shelters are needed, with the top three being recommended as immediate priorities. Two shelters have since been installed. The third awaits cooperation from the county Public Works department, which must widen the sidewalk in front of Rio Vista Elementary School to allow for disabled access. Working Group members and the Healthy Neighborhoods Action Team have written letters to the county requesting speedy cooperation.

The TEACH Working Group has also written letters to ask the Pittsburg Police Department to allow the re-installation of a shelter across the street from the Pittsburg Health Center. The shelter was removed last year at the request of the Police and has not yet been reinstalled.

Tri Delta Transit is now planning to provide more route information at bus stops, including at least the route number and the start and stop times for the particular route.

Next Steps:

• Follow up with the Public Works Department to ensure that the sidewalk re-pavement process, planned for summer 2006, accommodates a shelter in front of Rio Vista Elementary.
• Search for new funding sources that could bring more shelters and benches to Pittsburg and Bay Point.
• Ensure this item is prioritized during Community-Based Transportation Planning and that Tri Delta Transit considers applying for Lifeline Transportation funds to install more shelters.
Bay Point/Pittsburg Priority #2

Advocate for changes to increase frequency and reduce wait time at BART station for buses to Health Facilities

**Background:** Residents traveling by bus from Bay Point to health facilities in Pittsburg take the Tri Delta Transit #389 to the BART station and then change buses. While five routes go from BART to the Pittsburg Health Center (PHC), until November 2004 the only quick way to get from BART to PHC was the #391 (about 20 minutes travel time). Other routes take about 50 minutes. But people usually had to wait anywhere from 20 to 50 minutes for a #391 bus. Coordinating schedules (or “timed transfers”) between #389 and #391 could greatly decrease waiting time at BART and the total time spent on the bus. Increasing frequency would also decrease wait time and increase access.

**Cost:** Very High ongoing costs to increase frequencies on all lines: about $3 million/year. High ongoing costs for individual lines: about $300,000-$780,000 per year. Low one-time costs to investigate whether this schedule coordination would work.

**Current Status:** Less than a month after the Bay Point community forum and in response to petitions from Bay Point residents, Tri Delta Transit implemented a change in route #200: adding a new stop at the Pittsburg/Bay Point BART station. The route provides connections between East County and the Regional Medical Center in Martinez. The change has also shortened wait times for riders who understand that there are now two buses (#391 and #200) that provide rapid service from BART to clinics in Pittsburg. This change not only cuts 45 minutes or more off the round-trip travel time to Martinez, it also provides another quick connection from the BART station to the Pittsburg Health Center.

Beyond that change, there are no likely near-term sources of new funding to provide annual funds at the levels needed to increase frequency on other routes. One reason for this is that when the county’s transportation sales tax was renewed, county leaders chose not to increase funding for local bus service in East County. Tri Delta Transit is heavily dependent on sales tax revenues; if the economy recovers and if sales tax revenues rise more quickly than costs do, the agency may be able to increase service.

TALC produced a “Transit Tips” flyer with recommendations on the most direct routes to health care facilities as well as the best times to make appointments for shorter travel/wait times. The flyer was widely distributed through the Health Access Coalition and the Bay Point Family Health Center.

**Next Steps:**

- Ensure access to health care remains on the policy agenda, so that improvements will be considered when new funding comes available.
- Encourage Tri Delta Transit to apply for Lifeline Transportation funds to increase frequencies on the most heavily used lines.

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2 Staff estimates from Tri Delta Transit, 2004.
Bay Point/Pittsburg Emerging Priorities

Bilingual information about transportation services

Through ongoing Working Group meetings, residents of Pittsburg and Bay Point identified improved accessible information for monolingual Spanish speakers as an additional priority for East Contra Costa transportation access to healthcare. Working Group members reviewed Tri Delta Transit’s existing schedule and informational materials. Based on this review, members developed a list of suggested changes to improve these tools to help monolingual Spanish speakers better navigate the system.

The Working Group submitted these recommendations to Tri Delta Transit’s marketing department, which implemented the changes. The resulting improvements include a notice on the cover of Tri Delta Transit’s schedule stating that the schedule has bilingual information. Previously the schedule had no Spanish on the cover. Key phrases not previously translated such as “Weekdays Only”, “Call for discount ticket information:”, “Westbound” and “Eastbound” have also been translated.

To follow up, Tri Delta Transit’s Marketing Director came to the November 2005 meeting of the Working Group to share the agency’s new 3 year marketing plan, which addresses many of the broader issues raised by the Working Group, and to ask for feedback and support in implementing the plans. Items in the marketing plan that address the Working Group’s suggestions include the distribution of a “Basic Spanish for Transit Employees” phrase book to all of Tri Delta’s drivers, GPS tracking devices on individual buses which would allow for bilingual announcements of anticipated arrival times at bus stops, and hiring a consultant to evaluate customer service on the bus.

Next Steps:

- Continue to work with Tri Delta to improve their outreach and materials to serve the Spanish-speaking population that uses their services.
- Ensure that this solution is identified as a priority in the Community Based Transportation Planning and that Tri Delta Transit considers applying for Lifeline Transportation or other funds to carrying it out.
- Track progress on Tri Delta Transit’s marketing plan, including ensuring that the customer service consultant addresses driver interactions with monolingual Spanish-speakers.

Accommodation of strollers on buses

Issues with strollers aboard Tri Delta Transit buses are a common topic during TEACH Working Group meetings. Bus seating areas are not large enough to accommodate most strollers, which protrude into the aisle. Often, there is confusion and delay as Spanish-speaking residents with strollers do not understand the English-speaking drivers’ requests that they do not block the aisles. To address this common problem, Tri Delta will remove one seat from each of their buses and create appropriate signage to designate a stroller storage area. Tri Delta Transit’s Board approved this innovative solution in December 2005 and full implementation is expected by March 2006. Tri Delta is the first transit agency in the country to implement such project to accommodate parents with strollers.

Next Steps:

- Assure that the stroller storage areas have signage with clear symbols as well as bilingual instructions.
Advocate for fares and transfer policies that are less expensive for regular users

Unlike most agencies, Tri Delta Transit does not offer the option of a weekly or monthly pass. Transfers, good for two hours, are not good for trips on the same line. The Bay Point community is served by only one line, #389, so transfers are not good when traveling within Bay Point. In turn, the $1 fare for adults and for children 6 years and older must be paid with each boarding. For example, a parent taking two children to the same school thus pays $8 per day [$1x (4 trips x 1 adult) + $1(2 trips x 2 children)]. School trips alone cost over $1,400 per year. Residents have asked that Tri Delta Transit change its fare and transfer policy to relieve this burden.

At the TEACH Working Group meeting held in November 2005, Tri Delta Transit responded that they are looking into pass options, one of which would be a daily pass. The daily pass may cost approximately $2 and could be used on any route. Among the other pass options, such as monthly passes that would translate into paying a large sum of money up front, residents were most enthusiastic about the daily pass.

Next Steps:

- Engage the community in the pass selection process within Tri Delta Transit and advocate for adoption of the daily pass described above.
- Ensure that the provision of daily or weekly passes is prioritized in the Community Based Transportation Plans.

Change Tri Delta route #389, serving Bay Point, to travel through the Lynbrook Park neighborhood

Residents who live in the area surrounding Lynbrook Park do not have a bus stop close to their neighborhood. Currently, route #389 travels down Willow Pass Road and turns at Port Chicago, leaving out Lynbrook Park. This neighborhood is home to many families that have one car or no car at all. Residents have commented that because the nearest bus stop is so far from this neighborhood, many don’t bother taking the bus because by the time they arrive at the bus stop, they have walked most of the way to popular destinations such as the Bay Point Family Health Clinic, Riverview Middle School and Rio Vista Elementary. Particularly during the rainy season, the thirty-minute walk to these destinations is difficult for residents seeking care at the clinic or for children going to and from school.

During a TEACH Working Group meeting, an active resident and member of the TEACH Working Group presented a proposal of a modified route that would prove more efficient and serve this neighborhood. This new route would involve traveling down Kevin Dr., a wide street that goes through the neighborhood but which does not face residents’ front yards (reducing the possibility for opposition from residents). The well-received proposal, which included possible stop locations, prompted the Chief Operating Officer of Tri Delta Transit to commit to investigating it further. This change would significantly increase access to countless services for residents in this neighborhood.
Tri Delta Transit plans to hold a public hearing for this change in Summer 2006, for implementation in the fall.

**Next Steps:**

- Representatives from the TEACH Working group will attend the public hearing in support of this change.
- Follow up with Tri Delta Transit on the process of investigating this route modification and advocate for this change with the Board of Directors.

**Prioritize health access in plans for development around new eBART station at Railroad Avenue**

The City of Pittsburg is developing a Specific Plan for the area around the proposed eBART station at the intersection of Railroad Avenue and Highway 4. In this planning process the city will seek input about what new development to plan for around this new transit station. Although the new station, like the entire eBART line, will not be built until 2010, it is essential to assert health access as an area of concern early in the process. A successful example of this coordination can be seen at Oakland’s Fruitvale Transit Village. There, identifying health facilities as crucial public amenities led to funding to relocate La Clinica de la Raza. The new clinic is in a new building at the BART station and at the confluence of nine bus routes.

Similarly, the Railroad Avenue station will not only provide a connection to the larger region via eBART, it will also serve as a transfer point for several bus lines: five routes already pass through or near the area. Moving either La Clinica Pittsburg or the Pittsburg Health Clinic to a new transit village around the new Railroad Avenue station would make the clinic far more accessible to patients from throughout Eastern Contra Costa County.

**Next Steps:**

- Work with health agencies and the City of Pittsburg to ensure that access to health care is prioritized in the Railroad Avenue eBART station Specific Plan, including the potential to locate a clinic at the station.
Countywide Priority #1

Increase coordination between health agencies and transit agencies

**Background:** Regular meetings between health and transportation agencies could allow the agencies to share information and complement each other’s efforts, so that health agencies could better know how to secure desired changes from transit agencies and transit agencies are aware of the locations of new health facilities before they open. One of the most effective ways to do this would be creating links between existing networks. Existing networks include the Contra Costa Transportation Alliance, a bi-monthly meeting of transit and social service agencies to address the challenges of helping people move from welfare to work in Contra Costa County, and the Health Access Coalition (HAC), a coalition of Contra Costa health service agency representatives working on improving access to health care.

**Cost:** Low ongoing costs for coordination. Unknown savings or additional costs depending on results of coordination activities.

**Current Status:** Health and transit officials have started collaborating more closely. A representative from the Health Access Coalition started participating in bi-monthly meetings of the Contra Costa Transportation Alliance, where transportation access to health care issues are now consistently addressed. Similarly, transportation agencies’ staffers in the Transportation Alliance have started participating in meetings of the Health Access Coalition.

In June of 2005, the Health Access Coalition hosted a transportation-focused meeting to create dialogue with transit agencies. Contact lists were exchanged between the Health Access Coalition, Tri Delta Transit, County Connection, West Cat, and the Transportation Alliance. An informative question-and-answer session was held where the need for increased dialogue was stressed. This coordination has helped spur some of the improvements described in this report has opened the doors for long-term cooperation among these agencies. Furthermore, in light of transportation's high-priority in access to health care issues, the Health Access Coalition asked TALC to conduct a training for its members on how to influence transportation decisions. The February 2006 HAC meeting encouraged health agency representatives to become involved in the upcoming outreach meetings for Community-Based Transportation Planning and emphasized health access as a priority.

**Next Steps:**

- Set up a structure to ensure ongoing dialogue and cooperation among transit and health agencies beyond the TEACH project timeline.
- Encourage health clinics to regularly request travel information materials from transit agencies serving their facilities and to distribute that information to their clients.
Countywide Emerging Priority

Coordination of health care clinic locations with transportation routes

The increased dialogue between health care and transportation agencies precipitated by the TEACH project exposed the need for coordination among these agencies, especially when relocating clinics, planning new clinics, or rerouting bus lines. Transit agencies have expressed frustration about not being informed about potential clinic relocations, which are sometimes placed far away from existing routes and stops. Similarly, health care agencies would like locations of existing facilities to be a significant consideration in transit route planning. A transportation-focused meeting of the Health Access Coalition has laid the groundwork for coordination by highlighting the issue and raising awareness of this common oversight.

Next Steps:

- Work with the Health Access Coalition to establish a step within the clinic location identification process, both by the county health department and by non-profit community clinics, to ensure that transportation access is a key factor.
- Advocate for MTC to include health clinics, not just hospitals, as essential destinations in any update of the Lifeline Transportation Network and in guidelines for the Lifeline Transportation funding program.